

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006997

FILED
May 02, 2009
Secretary of State

Entity Name: LIGHT FOR THE NATIONS CHURCH, INC.

Current Principal Place of Business:

400 NW 4TH AVENUE
MULBERRY, FL 33860 US

New Principal Place of Business:

Current Mailing Address:

400 NW 4TH AVENUE
MULBERRY, FL 33860 US

New Mailing Address:

FEI Number: 59-3559537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ARGUELLES, EDUARDO
400 NW 4TH AVENUE
MULBERRY, FL 33860 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ARGUELLES, EDUARDO
Address: 400 NW 4TH AVENUE
City-St-Zip: MULBERRY, FL 33860

Title: D () Delete
Name: ARGUELLES, ANNA RACH
Address: 5078 WILLIAMSTOWN BLVD
City-St-Zip: LAKELAND, FL 33810

Title: D () Delete
Name: ARGUELLES, LUCAS G
Address: 11705 OLD DADE CITY ROAD
City-St-Zip: KATHLEEN, FL 33849

Title: D () Delete
Name: ORTIZ, WILFREDO J
Address: P O BOX 292066 N/A
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: ORTIZ, CARLA B
Address: PO BOX 292066
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: SOLIS, SARA
Address: PO BOX 428
City-St-Zip: KATHLEEN, FL 33849

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDUARDO ARGUELLES

D

05/02/2009

Electronic Signature of Signing Officer or Director

_____ Date